## **CDC in Zimbabwe**









CDC office (physical presence)
6 U.S. Assignees
24 Locally Employed

### At a Glance

Population: 17,354,000 Per capita income: \$1,710 Life expectancy at birth women/men: 62/60 yrs Infant mortality rate: 55/1000 births

Source: Population Reference Bureau Fact Sheet, 2015

## Top 10 Causes of Death

- 1. HIV/AIDS 37%
- 2. Lower Respiratory Infections11%
- 3. Preterm Birth Complications 6%
- 4. Diarrheal Diseases 6%
- 5. Birth Asphyxia/Stroke 5%
- 6. Stroke 5%
- 7. Tuberculosis 4%
- 8. Neonatal Sepsis 3%
- 9. Ischemic Heart Disease 3%
- 10. Congenital Abnormalities

Source: GBD Compare (http://viz.healthmetricsandevaluation.org/gbd-compare/), 2013

The Center for Global Health and Prevention (CDC) Zimbabwe office (CDC/Zimbabwe) was opened in 2000 under the "LIFE" (Leadership and Investment for Fighting an Epidemic) Initiative. Initial activities focused on piloting key HIV interventions and health system strengthening in collaboration with the Ministry of Health and Child Welfare (MOHCW). The President's Malaria Initiative started in Zimbabwe in 2011. CDC/Zimbabwe currently partners with mostly local organizations to support the MOHCW in health system strengthening and increasing access and quality of HIV prevention, care and treatment interventions.

#### **HIV/AIDS**

Through the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the CDC Zimbabwe office is helping to achieve national goals for prevention, care, and treatment of HIV/AIDS and related conditions as well as helping rebuild Zimbabwe's national health systems following significant socio-economic challenges over the past decade. This support includes strengthening collection and use of health data for program management and decision making from facility to national levels, strengthening laboratory quality and capacity for patient monitoring, and building human resources for health through support for the University of Zimbabwe MPH program, leadership and management training for district health teams, and development of a national Human Resource Information System.

Other key activities include supporting key national surveillance systems and evaluations, including HIV prevalence and incidence estimates, HIV drug resistance surveys, and a national impact evaluation of the prevention of mother-child HIV transmission program. CDC Zimbabwe also supports infection control policy development and program implementation, capacity building for HIV treatment initiation in church-related hospitals, and improvement of national blood services.

Recently initiated activities include support for implementation of voluntary medical male circumcision, national support for training and mentoring of HIV/AIDS program service delivery, and providing for expanded clinic space nationwide.



#### Malaria

Under the U.S. President's Malaria Initiative (PMI), CDC has assigned a Resident Advisor to Zimbabwe as part of an interagency team with USAID to support the Ministry of Health in implementing malaria prevention and control interventions; these include providing long-lasting insecticide mosquito nets and indoor residual spraying; preventing malaria in pregnancy; improving diagnostics and case management; surveillance, and monitoring and evaluation of malaria-related activities. PMI activities commenced in Zimbabwe in 2011 and \$12 million and \$14 million was funded by PMI in 2011 and 2012, respectively. Specific examples of CDC technical support have included: supporting the Ministry of Health and Child Welfare's (MOHCW) goal of universal coverage of long lasting insecticidal nets (LLINs) in the 30 high-burden malaria districts with moderate to high transmission of malaria, supporting the training of health facility workers and community health workers to improve case management of malaria, supporting the National Malaria Control Program's (NMCP) malaria in pregnancy policy by procuring

# Impact in Zimbabwe

- As of 2014, 52% Estimated percentage of adults living with HIV receiving antiretroviral treatment
- 21 laboratories on the path to accreditation under the laboratory mentorship program using the SLMTA tool

approximately 1 million treatments of sulfadoxine-pyrimethamine (SP) for treatment of malaria in pregnant women, and provide technical assistance to refine the quality assurance of rapid diagnostic tests throughout the health system down to the community level and recommend best practice for implementation.





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